## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docket Number

0 511456

| CLAIMS AS FILED - PART I (Column 1) (Column 2)               |   |  |                                       |  |                              |                  |         | SMALL ENTITY TYPE OF |                        |                  | OTHER THAN<br>SMALL ENTITY |                        |  |  |
|--|---|--|---------------------------------------|--|------------------------------|------------------|---------|----------------------|------------------------|------------------|----------------------------|------------------------|--|--|
| TOTAL CLAIMS   |   |  |                                       |  |                              |                  |         | HATE                 | FEE                    |                  | RATE                       | FEE                    |  |  |
| FOR  |   |  | NUMBER I                              | FILED                                  | NUMBER EXTRA                 |                  |         | BASIC FEE            | 4.75°                  | OR               | BASIC FEE                  |                        |  |  |
| TOTAL CHARGEABLE CLAIMS                                      |   |  | <b>€</b> min                          | us 20=                                 | •                            |                  |         | X\$ 9=               |                        | OR               | XS18=                      | ·                      |  |  |
| INDEPENDENT CLAIMS   |   |  | 3 mi                                  | nus 3 =                                |                              |                  |         | X44=                 |                        | OR               | X88=                       |                        |  |  |
| MULTIPLE DEPENDENT CLAIM P                                   |   |  | RESENT                                |  |                              |                  |         | - 15Q=               |                        | OR               | +300 ·=                    |                        |  |  |
| • if   | the difference  | in column 1 is i   | less than zero, enter "0" in column 2 |  |                              |                  | •       | TOTAL                | 476                    | OR               | TOTAL                      |                        |  |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3 |   |  |                                       |  |                              | <u>1</u>         | SMALL E | NTITY                | OR .                   | OTHER<br>SMALL E | NTITY                      |                        |  |  |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                       | HIGH<br>NUM<br>PREVIO<br>PAID          | SER<br>DUSLY                 | PRESENT<br>EXTRA |         | RATE                 | ADDI-<br>TIONAL<br>FEE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |
|  | Total   | • 60   | Minus                                 | - 9                                    | 0                            | ε                | ∦│      | XS 9=                |                        | OR               | XS18=                      |                        |  |  |
|  | Independent   | . 3  | Minus                                 | ***                                    | 3                            | =                | 4       | X43=                 |                        | OR               | X86=                       |                        |  |  |
| <b>_</b>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |                                       |  |                              |                  | ل       | +145=                |                        | OR               | +290=                      | •                      |  |  |
| •  |   |  |                                       |  |                              |                  |         | TOTAL<br>ADDIT, FEE  |                        | OR               | TOTAL<br>ADDIT. FEE        |                        |  |  |
|  |   | <u>) ·</u>   | AUTI. 1 CE (                          |  |                              |                  |         |                      |                        |                  |                            |                        |  |  |
| AMENDMENT B  |   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  |                                       | (Colui<br>High<br>NUM<br>PREVI<br>PAID | EST<br>BER                   | PRESENT          |         | RATE                 | ADDI-<br>TIONAL<br>FEE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |
|  | Total   | *  | Minus                                 | ***                                    |                              | =                |         | X\$ 9≖               |                        | OR               | X\$18=                     |                        |  |  |
|  | Incependent   | •  | Minus                                 | •••                                    |                              | -                | 4       | X43=                 |                        | OR               | X86=                       |                        |  |  |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |                                       |  |                              | <del></del> _    | ا ل     | +145=                | •                      | OR               | +290=                      |                        |  |  |
|  |   |  |                                       |  |                              |                  |         | TOTAL<br>ADDIT, FEE  | ·                      | OR               | TOTAL<br>ADDIT. FEE        |                        |  |  |
| (Column 1) (Column 2) (Column 3)                             |   |  |                                       |  |                              |                  |         |                      |                        |                  |                            |                        |  |  |
| AMENDMENT C  |   | CLAIMS REMAINING AFTER AMENDMENT   |                                       | HIGH<br>NUM<br>PREVI                   | IEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |         | RATE                 | ADDI-<br>TIONAL<br>FEE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |
|  | Total   | *  | Minus                                 | ***                                    |                              | <b>.</b>         |         | X\$ 9=               |                        | OR               | X\$18=                     |                        |  |  |
|  | independent   | •  | Minus.                                | ***                                    |                              | =                | 4       | X43≈                 | • •                    | OR               | X86=                       |                        |  |  |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |                                       |  |                              |                  |         | +145=                |                        | OR               | +290=                      |                        |  |  |
| •  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |                                       |  |                              |                  |         |                      |                        | 00               | TOTAL ADDIT, FEE           |                        |  |  |
|  |   | and the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE ADDIT. FEE  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                       |  |                              |                  |         |                      |                        |                  |                            |                        |  |  |